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NEIFELD REF.: EDWA0018U-US
IN RE APPLICATION OF: White
APPLICATION NO: 10/733,292
FILED: December 12, 2003
FOR: Intraluminal Graft

ASSISTANT COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

**AMENDMENT COVER LETTER
INCLUDING AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT**

SIR:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required
- ☐ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.
- ☐ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement submitted herewith.
- ☒ Additional documents filed herewith: 37 CFR 1.116 Amendment After Final Rejection (22 Pages)

The Fee has been calculated as shown below:

| CLAIMS | CLAIMS REMAINING | | HIGHEST NUMBER PREVIOUSLY PAID | NO. EXTRA CLAIMS | RATE | CALCULATIONS | |
|-------------|---------------------|--|-----------------------------------|---------------------|-----------|--------------|------|
| TOTAL | 25 | MINUS | 25 | 0 | × \$50 = | 0.00 | |
| INDEPENDENT | 2 | MINUS | 2 | 0 | × \$200 = | | |
| | | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS | | | + \$360 = | | |
| | | TOTAL OF ABOVE CALCULATIONS | | | | | 0.00 |
| | | <input type="checkbox"/> Reduction by 50% for filing by Small Entity | | | | | |
| | | <input type="checkbox"/> Recordation of Assignment | | | | + \$40 = | |
| | | <input type="checkbox"/> Petition for Extension of Time: 1 Month | | | | + \$120 = | 0.00 |
| | | <input type="checkbox"/> 2 Months | | | | + \$450 = | |
| | | <input type="checkbox"/> 3 Months | | | | + \$1,020 = | |
| | | <input type="checkbox"/> 4 Months | | | | + \$1,590 = | |
| | | <input type="checkbox"/> Terminal Disclaimer (of three US patents) | | | | + \$130 = | 0.00 |
| | | <input type="checkbox"/> Information Disclosure Statement Prior to Final | | | | + \$180 = | |
| | | <input type="checkbox"/> Other: _____ | | | | | |
| | | TOTAL | | | | | 0.00 |

- ☐ A check including the amount of _____ is attached.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2106.

Respectfully Submitted,

12/26/05
Date

Richard A. Neifeld, Ph.D.
Registration No. 35,299
Attorney of Record

NEIFELD DOCKET NO: EDWA0018U-US



IN THE UNITED STATES PATENT & TRADEMARK OFFICE

IN RE APPLICATION OF: White et al.

USPTO CONFIRMATION CODE: 2518

APPLICATION NO: 10/733,292

FILED: 12/12/2003

EXAMINER: Michael Thaler

GROUP ART UNIT: 3731

FOR: INTRALUMINAL GRAFT

ASSISTANT COMMISSIONER FOR PATENTS

ALEXANDRIA, VA 22313

37 CFR 1.116 AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the final office action mailed August 23, 2005, the applicants submit this formalities amendment.